

Safe dispensing practice checklist

- Request sight of the patient-held recording document and check if any dose changes have been made since last prescription issue; this is to double check in case prescribing systems have not been up-dated post test review.
- Assessment of need of individual patients; packaging, labelling and PIL requirements for patients who may have reduced manual dexterity. Larger containers, or ribbed easy-to-grip lids may remove the likelihood of patients decanting the tablets into a jam jar once at home.
- The strength of tablet supplied to the patient must remain consistent to prevent any confusion for the patient over the number of tablets they need to take.
- Communicate the dose as quantity of tablets and weekly frequency to the patient. Is a dose reminder required e.g. patient administration record sheet.
- Differentiation between methotrexate and folic acid packaging. If patients receive both medicines concurrently how can they distinguish between them given that both may be round yellow tablets of similar size? The packaging can offer a clue, so needs to differ for the two medicines.
- Beware patients attending with other symptoms; signs of methotrexate toxicity or intolerance may present as for example, breathlessness, dry persistent cough, vomiting and diarrhoea. Know when to refer back to the prescriber. It is good practice to maintain a record of OTC items supplied to the patient.